

## **Authorization of Outpatient Dental and Surgical Procedures**

- 1. A separate SAR number must be issued to the physician (dentist) and the facility at which the procedure will be done.
- 2. The physician must be CCS-paneled; outpatient facilities are not required to be CCS approved.
- 3. If the physician does not already have an authorization for SCG 01 or 02, SCG 01 should also be included on the SAR. This will allow for the CCS client to access pharmaceuticals and follow-up care.
- 4. Anesthesiologists and assistant surgeons do not require a separate SAR number, but can bill for services using the surgeon's SAR number. Laboratory and radiology services may also be billed using the physician's SAR number.
- 5. SARs for Hospital Outpatient Departments and Organized Outpatient Surgical Facilities should be issued with the following codes, as appropriate:

<u>HCPCS</u>	<u>Description</u>
Z7500	Use of hospital examining or treatment room
Z7502	Use of emergency room (emergency conditions only)
Z7504	Use of cast room
Z7506	Use of operating room or cystoscopic room, first hour
Z7508	Use of operating room or cystoscopic room, first subsequent half hour
Z7510	Use of operating room or cystoscopic room, second subsequent half hour
Z7512	Use of recovery room
Z7514	Room and board, general nursing care for stays of less than 24 hours, including ordinary medication
Z7612	Unlisted services

- 6. Each of the above HCPCS codes should have a quantity of one (1) with the exception of item Z7510, which may have a quantity of 1 or more depending on the nature of the procedure.
- 7. If the procedure is expected to take longer than 2.5 hours more time in the OR may be authorized, however, the facility will need to provide medical justification why the extra time is needed. It is the responsibility of the provider to submit adequate documentation. A CCS authorization alone will <u>not</u> override the quantity limitation.